

FILED

DEC 03 2014

CITY CLERK

RESOLUTION NO. 50, 2014

BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF TERRE HAUTE, INDIANA:

WHEREAS, There are insufficient funds in a certain account of the Fire budget to meet current and anticipated expenditures within said Department, and,

WHEREAS, There are surplus funds in another account of the same budget, said Accounts being within the appropriation heretofore made for the use of said Department.

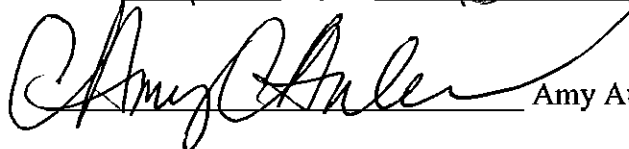
BE IT THEREFORE RESOLVED: That the following transfer be made in the Accounts heretofore appropriated for the use of said Department:

FROM: 0101-0016-01-412.102 \$3,000.00 TO: 0101-0016-01-412.110 \$3,000.00  
Sick Day Payout Haz Mat Specialty

Total \$3,000.00 \$3,000.00

Introduced by:  Amy Auler, Councilman

Passed in open Council this 11<sup>th</sup> day of December, 2014.

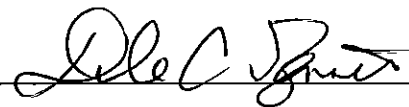
 Amy Auler, President

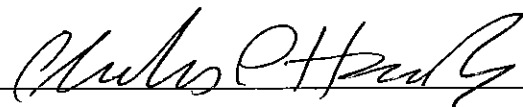
ATTEST:  Charles P. Hanley, City Clerk

Presented by me to the Mayor this 11<sup>th</sup> day of December, 2014.

 Charles P. Hanley, City Clerk

Approved by me, the Mayor, this 12<sup>TH</sup> day of DECEMBER, 2014.

 Duke A. Bennett, Mayor

ATTEST:  Charles P. Hanley, City Clerk

**REQUEST FOR TRANSFER OF BUDGETED FUNDS**  
(For Approval by Mayor, Controller, and City Council)

This form is to be used when the requested transfer is between two major classifications

DEPARTMENT or FUND: General (Fire General) 0101-0016  
DATE: December 1, 2014

Account #	Account Name	Amount
FROM: 0101-0016-01-412.102	Sick Day Payout	\$3,000.00
TO: 0101-0016-01-412.110	Haz Mat Specialty	\$3,000.00
FROM: _____	_____	\$ _____
TO: _____	_____	\$ _____
FROM: _____	_____	\$ _____
TO: _____	_____	\$ _____
FROM: _____	_____	\$ _____
TO: _____	_____	\$ _____
FROM: _____	_____	\$ _____
TO: _____	_____	\$ _____
FROM: _____	_____	\$ _____
TO: _____	_____	\$ _____

Total Amount to Be Transferred \$ 3,000.00

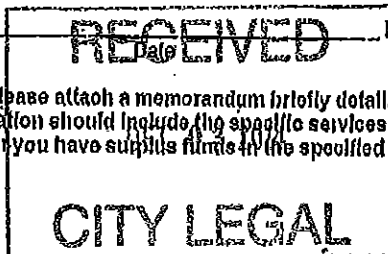
Department Head Approval: [Signature] Deputy Chief Date: 12-2-2014  
(Forward to Mayor) Signature

Mayoral Approval: [Signature] Date: 12-2-14  
(Forward to Controller) Signature

Controller Approval: [Signature] Date: 12/2/14  
(Forward to the Legal Department)

Received by Legal: \_\_\_\_\_ Resolution # 50

DEPARTMENT HEAD: Please attach a memorandum briefly detailing the need for this resolution. Such information should include the specific services or products you intend to purchase and the reason you have surplus funds in the specified accounts.



Revised July 2010

*per cm*  
*Amr*  
*12/3/14*